The Hampden Hippocrat

A Bulletin for the Hampden District of the Massachusetts Medical Society

VOLUME V AUGUST, 1946 Number 2

The Presidency-Elect

How does it feel to be shunted without warning, like an empty freight car from a string of spares on a siding, out onto the main line? Disconcerting, to say the least. And when the size of the prospective lading becomes clear, the reaction approaches dismay. From the inside, this obsolescent, war-torn caravan appears all too limited in capacity, and it creaks and groans even under ordinary burdens.

But, as the couplings are made fast and the joltings cease, the steady flat-wheeled rhythm beats out a persistent messages, 'Honor is meant, honor is meant, honor is meant', — yes, honor to Western Massachusetts, the Hampden District Society, — and, for the first time on record, to the Paper City, the Venice of America. Thus, in spite of obvious inadequacies, acceptance becomes mandatory, and the election achieves the impelling force of a challenge.

Possibly a year of conditioning will provide effectual greasing of the old car's running gear and permit sufficient reinforcement of the superstructure to meet the test, even though the capacity cannot be increased and lop-sided wheels, in all probability, will remain as flat as ever.

With full knowledge of the immensity of the load and painful realization of all short-comings, I nevertheless have chosen to make the run and shall do my best to justify the consideration of my fellow-members that prompted their selection last May.

How does it feel? In the words of Charles Lutwidge Dodgson, from *The Hunting of the Snark,*

'. . . . Life becomes a spasm
And History a whiz:
If that is not sensation,
I don't know what it is;'

BUT, '. . . . my heart is like nothing so much as a bowl
Brimming over with quivering curds'!

Edward P. Bagg

Hampden Hippocrat

"Life is short and art is long, the occasion fleeting, experience fallacious and judgment difficult." —Hippocrates, 430 B.C.

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EDITORIAL

George is Tabu

The choice of one of our own members,—indeed, one of the Editors of the Hippocrat, none other than S. Q. Lapius himself,—to stand in line for the presidency of the Massachusetts Medical Society, is an honor that merits acknowledgement. We do so here and now, and as we wish him well, we trust that he will be able to meet all future deadlines as they may arise.

But his selection should serve as a reminder that the job of running our medical affairs should not be left to "George", be he ever so reluctant or so willing. The responsibility in assisting our officers is yours and mine and should not be delegated. If medical standards are to remain high and proper solutions are to be found for the many important problems that face physicians today, each one of us must think and act for himself towards the common good.

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DRUGGISTS

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Nor is it fair or wise to leave such tasks to the faithful few who for as many years have incurred the trouble and expense of numerous trips to Boston in order to represent the Hampden District in sessions of various committees and in the meetings of the Council. Responsibilities should be shared as freely as are privileges, and committees should be kept representative by the service of many individuals if administration is to remain sound and points of view fresh. Step up, ladies and gentlemen and hereafter show enough interest in your own vital affairs to secure appointments.

Here's health, then, through such prospects, to Society at large, to the Massachusetts Medical Society as well, and to the Hampden District in particular. An extra portion of strength is hereby fervently bespoken for our President-Elect who has freely confessed that he needs it now more than ever!

Why Not Draft Doctors?

To a sub-committee of the disillusioned Post War Planners has been assigned the task of discovering the best method of procuring medical officers for the next war. Preparedness today is the watch-word, even though disintegrating atoms may render first aid or any sort of aid vertily too little and too late.

Here is the opportunity that you ex-service medical men have been anticipating. Now the details can be told. Also, you now may tell how difficult it will be to secure any medical officers in the future, even though the preferred advancement of "reguars" is forgotten, and rank and renumeration commensurate with attainments is offered.

If present indications are accurate, only a few will volunteer. From all we can gather, the Commander-in-Chief wil be compelled to resort to a medical draft. Only thus will tbe

quotas be filled unless present views change. And only thus in reality will the problems be solved fairly and in the best interests of all.

In order to facilitate the work of the committeemen, let us have your comments, please, or better still, send them directly to Dr. G. P. Grabfield, Post-War Planning Committee, 8 Fenway, Boston, Massachusetts.

P. G. Education

Heartened by the reception of their initial efforts, Dr. Ohler's Post-War Planning Sub-committee on Education is busily at work upon the Fall and Winter campaign for post-war instruction.

The Post-Graduate Assembly is slated for October 30-31 at Hotel Bradford, Boston and the post-graduate courses will be given again, as they were last year, on Mondays and Wednesdays in Sanders Theatre from March 17 (with apologies to St. Patrick, through May 7th, 1946.

Between these assigned dates, it is hoped to fit in intinernant meetings with two, or at most three, speakers in the various arbitrary districts including the Franklin - Hampshire--Hampden group. The committee would prefer to proceed by case teaching where possible in the belief that information so dispensed will remain fixed in more minds because of the practical examples.

Various subjects were brought up at the June meeting that your representative attended, including tropical disease, malignancies, including cancer, in cooperation with the Cancer Committee, blood dyscrasias and the Rh factor, and, as an innovation, industrial medicine. If you have any fixed ideas on the subject or unfulfilled desires, hand them in or make them known in time for submission to the Program Committee.

P.S. Dr. James Smead who will run our P. G. Program for the winter of 1946-47 has the following comment to make:

There will be a program of post-graduate education in the county this fall and winter. The committee is working on it now but the final program is not yet set up. There is still time for suggestions regarding (1) subject matter, (2) number of programs desired and (3) approximate dates.

If anyone wishes to make any suggestions he can do so by getting in touch with Dr. J. L. Smead, 26 Temple St., Springfield.

My Son

My son is home!
He went from us scant years ago
And, wondering, we strove to guess in what new shape
Would he emerge from out the Alchemy of war,
And now a tall and adolescent lad returns a man.
Long years ago his father too was called
And then a hand shake at embarkation, an embrace, no more,
For fathers ever take a second place
And so the lad went out—to save our home
And make, perhaps, a better, brighter world.
One wonders should he laugh for victory
Or weep at seeing defeat o'er all today.

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For now he comes again to his own land
With gifts, unearned he thinks, awaiting him;
Gold that is wrenched from clutching fingers and
Dispersed with lavish hand by seated power.
Sobered he stands and thinks its shoddy worth
Is no exchange for his exalted hours.
There is a job to do—yes—but the gap of time
Has changed so much the course of future plans.
No more uncertain is he than the man
Who sired him, whom forever he regards
As like a sure and steady rock in stress,
And yet so young he cannot penetrate
Th' unwilling barrier that comes as a disguise
Learned with advancing years and may not yield.
The boy forgets, or rather cannot know,
That rocks are crystal fire and not he alone
Can feel the heat of soul. Uncertain, restless,
In his father's eye, this stripling dreams
From sun to sun, for such as he must find
And set his foot upon a new and upward path
In fearlessness and faith and constant striving.
If this be gained a father's hopes and prayers
Will bring a better world. Play well your part,
Oh son.

W. C.

Composed during the solitude of very early morning awaiting the return home of my son.

"ATTENTION"

Did you report to Mass. Study of Child Health Services, 319 Longwood Ave., Boston 15, the resume of our days' work as outlined in this questionaire sent to you in July. The practice of medicine doesn't just happen, Those who have made it thus for us need our cooperation now and then. Particularily NOW.—Ed.

Comments From A Returned Doctor

If the Wagner Murray Dingell bill had been passed by Congress, the medical professions would have had no one to blame but itself. The A. M. A. did a somewhat better job in presenting its side of the case before the Senate Committee on Education and Labor which held hearings on the bill, than did the proponents of the measure, who, in large part, were starry eyed but not overly practical individuals representing organizations with resounding names but few communicants. Aside from the bare fact, however, that the bill was not passed there is little reason for the doctors to take smug satisfaction in the outcome. There is no doubt that similar bills will be proposed in the future, and we can feel assured that their advocates will profit by their experiences and improve their tactics. Organized medicine will have to do more than say, "We want to do everything you want to do but we insist it be voluntary"; it will have to do more than hide behind the shop-worn sanctity of the doctor-patient relationship; it will have to do more than sneer at Allan Butler.

It seems to us that the time has come to forget about recriminations and name-calling, to stop haggling over how many military rejections could have been prevented by the Surgeon General of the Public Heath

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Service, and get back to the fundamentals which are these:

a. American medicine is the best in the world,
b. It costs too much.

If you have any doubt about the first of these statements ask a few former medical officers how things were in any of the other continents. If you have any doubt about the second, come out and cast your shadow.

The policy of the medical profession in this country has always been to do everything possible to improve the standards of medical care, but to do nothing, until forced to, about the economics of medicine. That tradition is still being maintained. Look over the programs of any of the medical conventions—incuding the A.M.A.—of the past six months and if you find listed a single frank discussion of economic problems in medicine you have sharp eyes indeed. Except for a few embarrassed words, floundering in the dreariness of presidential addresses, the subject is utterly ignored. Why? Probably there are several reasons. Such matters seem a little sordid, they lack the fascination of scientific presentations, there are few who take the trouble to inform themselves about them, but most of all they are something for the leaders of the profession to worry about.

Unfortunately the frettings of the leaders of the professions have not been overly fruitful thus far. If they had there would be less hue and cry in political circles foi governmental action now. For twenty years the realization has been growing that changes are overdue, for several successive years past there have been introduced into Congress predecessors of the current Wagner-Murray Dingell bill, and yet not until February 14, 1946 did the American Medical Association, with, by this time, a highly vocal segment of the citizenry, numerous social agencies of varying value and importance, an influential Congressional group, and the President of the United States all baying at its heels, finally offer anything faintly resembling a National Health Program.

It may be significant to note that one of the major points in this pro gram urgently advocates prepayment plans for hospitalization, although in 1933 discussing Hospital Insurance and Medical Care the Journal of the A.M.A. editorially sneered, "In times of sickness and misfortune, charlatans flourish. The desperate man grasps at any straw and is ready to try any scheme that offers something for nothing or more for less than it costs."

It is perfectly true that many of us would prefer not to be reminded of opinions we may have held, and even ardently championed, in March 1933, but as an example of leadership and foresight the record is not impressive.

Nor is there any assurance that the present leadership will be better. The average age of the officers and board of trustees of the A.M.A. is 62 years. If you believe that the House of Delegates, rather than the trustees, of the A.M.A. guide our destinies the average age of the delegates from Massachusetts is 64. In other words, organized medicine in America is being led by men who have retired or are about to retire from their profession, and who, if they are living ten years from now, will have no personal interest in the business aspects of medical practice.

It is all very well to mutter that we

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do not want bureaucratic medicine, but unless more interest in the mounting costs of medical care is shown by the rank and file of the profession, and unless concrete proposals instead of vague verbiage is offered to meet the problem, we shall awaken some morning to find we no longer have any choice. The solution of the matter can not be left to the Fishbein fraternity any more than it can to the ivory tower professors. It must be solved by the men who earn their living primarily by caring for the sick.

The Gallupe Plan

On July 10, 1946 Dr. Gallupe of Waltham spoke briefly before the combined staffs of the Springfield, Mercy and Wesson Hospitals, and representatives from Palmer and Ware, at the Academy of Medicine, Springfield, and at the invitation of Dr. Fred Hopkins. About one hundred physicians and hospital directors were present. He discussed the so-called "Gallupe Plan", instituted for the purpose of allowing graduates of Middlesex University to have limited hospital privileges. He said, in part, that there were 1500 physicians as gradutes of unapproved medical schools in Massachusetts, who take care of 1,500,000 sick people. His plan has been acknowledged by the Massachusetts Medical Society and by the Massachusetts Hospital Association. Some hospitals feared that they would lose their American College of Surgeons' rating and also the approval of the Council on Medical Education, but this was not so. Letters from these organizations approve of any effort Massachusetts may make for better medical practice. This is one way.

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There were about three hundred graduates of Middlesex University Medical School in the armed services. There was legislation introduced in in Massachusetts to force graduates of Middlesex University Medical School into hospitals and inasmuch as all hospitals are licensed by the State, a bill passed can do this. The Middlesex University alumnae have refused to push this legislation pending the Gallupe Plan approval.

Graduates of Middlesex Medical School, in Waltham, have all been accepted as members of the supervised courtesy staff at the Waltham Hospital. The supervised courtesy staff has been described in a letter sent out to all members of the Massachusetts Medical Society. There are graduates of Middlesex University at the Massachusetts General, Cambridge, Newton, and Beth Israel Hospitals. Middlesex graduates at the Waltham Hospital attend the staff meetings and the clinical pathological conferences. There has been a division of civic effort, regarding hospital welfare, in Waltham for twenty-five years. Now that the Middlesex graduates have been granted privileges at the Waltham hospital, this division of civic effort no longer exists. The plan really calls for a candidate to bring his medical patient to the hospital under the supervision of a staff member who will accept the responsibility. As time goes on these supervisors will be able to judge any man's conduct and report to the staff when that man is ready to carry on alone. In the meantime the candidate is not allowed to miss medical advances. Furthermore a plan such as this keeps out of a united medical front only those men who wilfully practice unethical procedures or are unsafe to practice by established standards.

The following questions were asked of Dr. Gallupe by the attending physicians:

Ques. - How long is the probation period?

Ans. - Forever, indefinitely. Some

a week. Others to the end of time.

Ques. - How close is the supervision?

Ans. - As close as the case indicates. The wards are supervised. Operative obstetrics and surgery are not undertaken by members of the supervised courtesy staff.

Ques. - To what extent do medical schools approve the Galupe Plan?

Ans. - The three Boston schools have opened their postgraduate courses to them. The deans of all these schools approve of the plan. The Massachusetts Medical Society is going to do more than the medical schools if the hospitals cooperate.

Ques. - How do you ease them out if they are unable to meet standards?

Ans. - I drop them.

Ques. - Do you have difficulty in getting supervisors?

Ans. - The burden falls on a few physicians.

Ques. - How long has the plan been in practice?

Ans. - One year and we do not use one supervisor all the time.

Ques. - Isn't it possible that one or two supervisors will get all the cases and work a racket?

Ans. - This is up to your staff. The men on ward duty at the time are good men to have. There you have changes and the whole work can be joined with this new idea and not disturb the sponsor too much.

Ques. - Are they allowed to assist at surgical operations?

Ans. - No.

Ques. - Do they use the men on service?

Ans. - Not a bad idea. I have mentioned this before.

Ques. - Are the staff meetings educational?

Ans. - Yes.

Ques. - Is the charter of the College of Physicians and Surgeons in Boston closed?

Ans. - Yes.

Ques. - Are osteopaths included in this study?

Ans. - No.

The temporary secretary of this meeting was Dr. Joseph Baker. After disrussion it was decided not to commit any of the people there. However, in any community all the hospitals must have the same setup or it will not work. It was left for Mr. John Dunlop, Supt. of Wesson Memorial Hospital to contact the other hospital superintendents for further consideration of this matter. It is a staff problem first, after which trustees must approve or disapprove.

Summer Memories

The old New England hills are green
And warm beneath the sun.
The flowers nodding in the fields
Seem lonely, every one.
They miss the racing feet of lads
Whose shouts they hear no more
Who, overnight, grew into men
And marched away to war.

They miss the boys who tramped
these fields
From dawn till afternoon,
The men whose blood ran down the
beach
In Normandy in June,
The boys who played at soldier here
With many gallant clashes,
The men who died to raise the flag
On Iwo Jima's ashes,
The men who fought among the
clouds
And somewhere lie alone

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The sea, without a stone.

The hills are green, the fields are warm,
Perhaps they think it odd
Today the friends they knew and loved
Are billeted with God.

H. S.

Composed under Pacific Suns.

The reader will notice that there has been a change in name on the editorial board. The missing names are those of men who worked hard to put this quarterly over and are now ready to relinquish to younger hands the torch. We trust that the new men will keep the flame burning brightly.

Dr. Roy Morgan Retires From Superintendtancy

The retirement of Dr. Roy Morgan from the position of Superintendent of the Westfield State Sanatorium marks the end of an era in tuberculosis research. From July, 1910 until July, 1946, on which date his retirement was announced, Dr. Morgan has served the cause of medical research faithfully anl well.

As a pioneer in the use of chest X-ray for the detection of tuberculosis, Dr. Morgan's active career has paralleled the public consciousness of the disease and the methods of treatment. In the old laboratory basement of the Children's Ward of the Westfield Sanatorium he had a room which served as both laboratory and pharmacy. There in 1920 a section of the room was set aside for X-ray equipment and it was there that Dr. Morgan did much of his research, exposing himself to the dangers of the rays in his eagerness to discover methods of diagnosis and treatment even before protective equipment was available.

A. J. D.